CMAQ Cost Change Request Form

Project Identification

TIP ID	09-09-0007	Sponsor	Elgin		
Project Lo	cation Description	Elgin Bikeway Plan Route 4 SW Quadrant			

Currently Programmed Funding – Before cost change(s)

Phase	Programmed FFY	Programmed Total Cost (\$000's)	Programmed Federal Cost (\$000's)	Programmed Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG1	2009	225	180	80	CMAQ	Local	
ENG 2	Deferred (15)	180	144	80	CMAQ	Local	
ROW	n/a	n/a	n/a	n/a			
CONST	Deferred (16)	2696	2157	80	CMAQ	Local	
CE	Deferred (16)	300	240	80	CMAQ	Local	
Total		3401	2721	80			

Phase	Programmed FFY	Programmed Total Cost (\$000's)	Programmed Federal Cost (\$000's)	Fund	Phase Accomplished*
ENG					
IMP					
Total					

Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated federal authorization date**
ENG1	2009	200	160	80	CMAQ	Local	1/1/2010
ENG 2	2015	250	164	66	CMAQ	Local	11/15/14
ROW	n/a	n/a	n/a	n/a			
CONST	2016	2696	2157	80	CMAQ	Local	4/29/16
CE	2016	300	240	80	CMAQ	Local	4/29/16
Total		3446	2721	79			

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated FTA Grant approval date***
ENG							
IMP							
Total							

Reau	ested	Cost	Changes	(+)	/ _)	١
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Check all that apply:	Cost Increase	X	Transfer of Funds	\boxtimes	Reinstatement of Deferred Funds
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Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds(\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1	2009	-25	-20	80	To ENG2
ENG 2	2015	70	20	80	From ENG1
ROW					
CONST					
CE					
Total		45	0	79	

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
Total					

Reason for Request

IMP

Check here if the reason is a scope change	and complete a	a Sco	pe Change	Request form.

The actual cost of ENG1 was reduced. ENG2 costs have increased, however this request is to transfer only the surplus ENG1 federal funds. The city of Elgin will provide the additional matching funds. Upon approval of this request, the locally executed agreement will be sent to District 1 for submittal to Central Office. Reinstatement of deferred ENG2 funds will be requested at that time.

State and Federal Project Information

Local Agency Agreement Attached

Select One.				
State/Federal Project of the state	or Grant Nu	ımbers Pro	ovided	Below
Most recently approve	d PPI Form	Attached		

Phase	State Job Number	Federal Project Number	FTA Grant Number
	X-00-000-00	XXX-0000(000)	IL-XX-XXXX-XX
ENG1	P-91-xxx-xx	CMM-9003(234)	
ENG 2	D-91-xxx-xx	CMM-9003(xxx)	
ROW	R-		
CONST	C-91-xxx-xx	CMM-9003(xxx)	
ENG			

Additional Comments